Discharge Monitoring Report - STA1W - Submittal Date: January 2001 Monitoring Period: October 01, 2000 - October 30, 2000 Permit # FL0177962-001 Discharge Point Number: D001 [] <Check if no discharge for reporting period CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION NAME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE NO. DATE SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING Thomas D. Fontaine, Ph.D. THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND Director, Environmental IMPRISONMENT. SEE 18 U.S.C. SEC. 1001 AND 33 U.S.C. SEC. 1319. (Penalties under these statutes may include fines up to Monitoring and Assessment \$10,000 and or maximum imprisonment of between 6 months and 5 years.) 561-682-6551 1/16/01 Department SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR Storet No. & CONCENTRATIONS Parameter Sample Sample Frequency Monitoring Location Type Annual Average MAX (Monthly) MIN (Monthly) Units Code Flow 50050 Calc Daily NODI=C 594 cfs EFF-1 (Outflow) G310 00300 0.11 Dissolved Oxygen InSitu Weekly mg/L EFF-1 (Outflow) G310 Dissolved Oxygen 00300 5 InSitu Weekly 0.96 mg/L SWU-1 (Inflow) S5A 00400 SU Field рΗ 1 InSitu Weekly 7.24 7.33 EFF-1 Outflow) G310 Total Phosphorus 00665 Grab / Flow-Weekly NODI=C mg/L as P EFF-1 Proportional

Flow-wt Mean

0.141

mg/L as P

(Outflow) G310

00665

SWU-1

(Inflow) S5A

Total Phosphorus

Composite

Grab / Flow-

Proportional

Composite

Weekly

Discharge Monitoring Report - STA1W - Submittal Date: January 2001

Monitoring Period: October 01, 2000 - October 30, 2000 Permit # FL0177962-001 Discharge Point Number: D002

[] <Check if no discharge for reporting period

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Thomas D. Fontaine, Ph.D. Director, Environmental Monitoring and Assessment Department	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. SEC. 1001 AND 33 U.S.C. SEC. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR	TELEPHONE NO. 561-682-6551	DATE 1/16/01
Parameter	AUTHORIZED AGENT					ATIONIC	
raiametei	Monitoring Location Code	Туре	Sample Frequency	MIN (Monthly)	CONCENTR Annual Average	MAX (Monthly)	Units
Flow	50050 1 EFF-2 (Outflow) G251	Calc	Daily		165	340	cfs
Dissolved Oxygen	00300 1 EFF-2 Outflow) G251	InSitu	Weekly	0.64			mg/L
Dissolved Oxygen	00300 5 SWU-1 (Inflow) S5A	InSitu	Weekly	0.96			mg/L
рН	00400 1 EFF-2 (Outflow) G251	InSitu	Weekly	7.28		7.37	SU Field
Total Phosphorus	00665 Y EFF-2 (Outflow) G251	Grab / Flow- Proportional Composite	Weekly		Flow-wt Mean 0.028		mg/L as P
Total Phosphorus	00665 P SWU-1 (Inflow) S5A	Grab / Flow- Proportional Composite	Weekly		Flow-wt Mean 0.141		mg/L as P